

10/584332

AP20 Rec'd PCT/PTO 23 JUN 2006

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD_R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	No
Computer Readable Form (CRF)?::	No
Title::	COMBINATION THERAPIES EMPLOYING A COMPOSITION COMPRISING A HMG COA REDUCTASE INHIBITOR AND A VITAMIN B6 RELATED COMPOUND
Attorney Docket Number::	12695.0037USWO
Request For Early Publication::	No
Request For Non-Publication::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	12
Small Entity::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Initial 06/23/06

## Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: CANADA  
Status:: Full Capacity  
Given Name:: Albert  
Middle Name::  
Family Name:: FRIESEN  
Name Suffix::  
City of Residence:: Winnipeg  
State or Province of Residence:: Manitoba  
Country of Residence:: Canada  
Street of mailing address:: 77 Shorecrest Drive  
City of mailing address:: Winnipeg  
State or Province of mailing address:: Manitoba  
Country of mailing address:: Canada  
Postal or Zip Code of mailing address:: R3P 1P4

## Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: CANADA  
Status:: Full Capacity  
Given Name:: Ahmad  
Middle Name::  
Family Name:: KHALIL  
Name Suffix::  
City of Residence:: Winnipeg  
State or Province of Residence:: Manitoba  
Country of Residence:: CANADA  
Street of mailing address:: 121 Gobert Crescent  
City of mailing address:: Winnipeg  
State or Province of mailing address:: Manitoba

Initial 06/23/06

Country of mailing address:: CANADA

Postal or Zip Code of mailing address:: R2N 2Z3

### Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: CANADA

Status:: Full Capacity

Given Name:: Marjorie

Middle Name::

Family Name:: ZETTLER

Name Suffix::

City of Residence:: Winnipeg

State or Province of Residence:: Manitoba

Country of Residence:: CANADA

Street of mailing address:: Apt #1, 141 River Avenue

City of mailing address:: Winnipeg

State or Province of mailing address:: Manitoba

Country of mailing address:: CANADA

Postal or Zip Code of mailing address:: R3L 0A8

### Correspondence Information

Correspondence Customer Number:: 23552

### Representative Information

Representative Customer Number::	23552
----------------------------------	-------

### Domestic Priority Information

Application::	Continuation Type::	Parent Application::	Parent Filing
---------------	---------------------	----------------------	---------------

Initial 06/23/06

			Date::
This Application	National Stage of	PCT/CA2004/002196	12/23/2004
PCT/CA2004/002196	Claims Benefit of	60/531605	12/23/2003
PCT/CA2004/002196	Claims Benefit of	60/586215	07/09/2004

### Assignee Information

Assignee Name:: Medicure International Inc.  
 Street of mailing address:: 4-1200 Waverly Street  
 City of mailing address:: Winnipeg  
 State or Province of mailing address:: Manitoba  
 Country of mailing address:: CANADA  
 Postal or Zip Code of mailing address:: R3T 0P4

Initial 06/23/06